	Case	24-11928-pm	m Doc 21	Filed 06/24/	24 Ente	red 06/24				
Fill	in this information	to identify your case	e:						lines 17 and	
D	ebtor 1	Chad	E.	Northeimer			According Statemen		culations requ	uired by this
D.	ebtor 1	First Name	Middle Name	Last Name			1. Disr	osable ind	come is not de	etermined
De	ebtor 2					_	under	11 U.S.C.	§ 1325(b)(3).	
(S	pouse, if filing)	First Name	Middle Name	Last Name		_			come is deteri § 1325(b)(3).	
Ur	nited States Bankr	uptcy Court for the:	Easter	n District of Pen	nsylvania				ent period is 3	
Ca	ase number	24-11928 p	mm						ent period is 3 ent period is 5	
(if	known)									
							□ Check	if this is a	n amended fil	ing
Of	ficial Form	122C-1								
Cł	anter 13	Stateme	nt of You	Current	Month	ly Inco	me			
	-	ation of C				. y				10/19
							-ible for bei		a If more ca	
3e a	is complete and a	ccurate as possible. et to this form. Inclu	. If two married peo de the line number	ple are filing togeth to which the additi	ner, both are e ional informat	iqually respon ion applies. O	sible for bell n the top of a	ng accurat any additio	e. If more spanning pages, v	vrite your name
	case number (if k		de the line namber	to willow the addition		аррс	.,	-	, ,	•
Pa	rt 1: Calculate	Your Average M	onthly Income							
1.	What is your mai	rital and filing status	s? Check one only.		·					
	, -	Fill out Column A, lin	•							
	Married. Fill of	ut both Columns A a	ind B, lines 2-11.							
10 va ex	01(10A). For exam	nonthly income that ple, if you are filing on nonths, add the inco suses own the same	on September 15, the ome for all 6 months	e 6-month period was and divide the total	ould be March by 6. Fill in th	h 1 through Au ie result. Do no	gust 31. If the it include any	e amount on income a nothing t	of your month mount more t o report for a	ily income than once. For
						Column Debtor		Column Debtor 2 non-filin	**	
2.	Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).						9,011.55			
3.	. Alimony and maintenance payments. Do not include payments from a spouse.						\$0.00			
4.	your dependents unmarried partne	n any source which s, including child su er, members of your l not include payments	pport. Include regul household, your der	lar contributions fro pendents, parents, a	m an and		\$0.00			
5.	Net income from farm	operating a busine	ess, profession, or	Debtor 1	Debtor 2					
	Gross receipts (b	efore all deductions)	\$0.00	\$0.00					
	Ordinary and nec	essary operating ex	penses	- \$0.00 -	\$0.00					
	•	me from a business,		\$0.00	\$0.00	Copy here →	\$0.00			
6.	Net income from	rental and other re	al property	Debtor 1	Debtor 2					
ί	Gross receipts (b	pefore all deductions)	\$0.00	\$0.00					
	Ordinary and ned	cessary operating ex	penses	- \$0.00 -	\$0.00					
	•	me from rental or otl		\$0.00	\$0.00	Сору	\$0.00			
İ	THE HOLLING HICO		rour property			here →	~0.00			

Case number (if known) 24-11928 pmm Diochiment Page 2 of 3 Debtor 1 Chad Middle Name Last Name First Name Column B Column A Debtor 2 or Debtor 1 non-filing spouse \$0.00 7. Interest, dividends, and royaltles \$0.00 8. Unemployment compensation Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you..... \$0.00 For your spouse..... 9. Pension or retirement income. Do not include any amount received that was a benefit \$0.00 under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below. Total amounts from separate pages, if any. \$9,011.55 \$9,011.55 11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. Total average monthly income Part 2: Determine How to Measure Your Deductions from Income 12. Copy your total average monthly income from line 11. \$9,011.55 13. Calculate the marital adjustment. Check one: You are not married, Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. \$0.00 \$0.00 Total..... Copy here. -14. Your current monthly income. Subtract the total in line 13 from line 12. \$9.011.55

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Doc 21

Deptor 1	Gliau			raye 3 U	Case Humber (ii kho	wii) <u>24-11920 pinin</u>
	First Name	Middle Name	Last Name			
15. Calculate	your current mont	thly income for the ye	ear. Follow these ste	eps:		
-	-					\$9,011.55
Multi	x 12					
15b. The	\$108,138.60					
16. Calculate	the median family	Income that applies	to vou. Follow thes	e steps:	овари 19-1-19-19-19-19-19-19-19-да до одного чиста боло до 19-19-19-19-19-19-19-19-19-19-19-19-19-1	And the state of t
	in the state in which	• •	•	<u>Pennsylvania</u>		
16b. Fill i	in the number of pe	ople in your househo	ld.	1		
16c. Fill i	n the median family	y income for your stat	e and size of house	hold		\$66,923.00
		le median income am . This list may also be				
17. How do th	ne lines compare?					
17a. 🚨	Line 15b is less th U.S.C. § 1325(b)(nan or equal to line 16 (3). Go to Part 3. Do h	ic. On the top of pag	ge 1 of this form, che ion of Your Disposab	ck box 1, <i>Disposable income is r</i> le Income (Official Form 122C–2	ot determined under 11).
17b. 🗹	1325(b)(3). Go to	than line 16c. On the Part 3 and fill out Cancome from line 14 ab	Iculation of Your D	s form, check box 2, <i>l</i> isposable Income (C	Disposable income is determined Official Form 122C-2). On line 39	under 11 U.S.C. § of that form, copy your
Part 3: Calc	ulate Your Com	mitment Period U	nder 11 U.S.C. §	§1325(b)(4)		
18. Copy you	r total average mo	nthly income from lir	ne 11			\$9,011.55
calculating	g the commitment p				h you, and you contend that of your spouse's income, copy the	
	om line 13. marital adjustment i	does not apply fill in t) on line 19a			¢0.00
	act line 19a from li					- <u>\$0.00</u> \$9,011.55
		thly income for the ye	ar Follow these ste	ane		
						
•				••••••		\$9,011.55
Multipl	y by 12 (the numbe	er of months in a year)) .			x 12
20b. The res	sult is your current i	monthly income for th	e year for this part o	of the form.		\$108,138.60
20c. Copy th	ne median family in	come for your state a	nd size of househol	d from line 16c		<u>\$66,923.00</u>
21. How do ti	ne lines compare?					
Line 201	b is less than line 2 nmitment period is	0c. Unless otherwise 3 <i>years.</i> Go to Part 4.	ordered by the coul	rt, on the top of page	1 of this form, check box 3,	
Line 201 check b	b is more than or edox 4, The commitment	qual to line 20c. Unles nent period is 5 years.	ss otherwise ordere Go to Part 4.	d by the court, on the	top of page 1 of this form,	
Part 4: Sign	Below					
De ciente e	hara undar nanalh	s of markers I declare t	hat the information	on this statement on	d in any attachments is true and	
by signing	nere, under penany	or perjury i deciare t	nat the information	on this statement and	u in any attachments is true and	wirect.
X <u>/s</u>	/ Chad E. Northe	imer				
Sign	nature of Debtor 1					
Dat	e 06/24/2024					
	MM/ DD/ YYYY					
If you chec	ked 17a, do NOT fi	ill out or file Form 122	C-2.			
If you chec	ked 17b, fill out For	m 122C-2 and file it	with this form. On li	ne 39 of that form, co	ppy your current monthly income	from line 14 above.

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